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UNITED NATIONS POPULATION FUND
PROPOSED PROJECTS AND PROGRAMMES

Recommendation by the Executive Director
Assistance to the Government of Sierra Leone
Support for a comprehensive population programme

Proposed UNFPA assistance:	$5.2 million, of which $3.5 million would be programmed from UNFPA regular resources. UNFPA would seek to provide the balance of $1.7 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.
Estimated value of the Government's contribution:	To be determined
Duration:	Five years
Estimated starting date:	January 1993
Executing agencies:	Government of Sierra Leone United Nations and United Nations agencies and organizations National and international non-governmental organizations (NGOs)
Government coordinating agency:	Department of Finance, National Development and Economic Planning

Sierra Leone

Demographic facts

Population (000)	
Total	4,151
Males	2,039
Females	2,112
Sex ratio (/100 females)	96.6
Urban	1,335
Rural	2,815
Per cent urban	32.2
Population in year 2000 (000)	5,395
Functional age groups (%)	
Young child: 0-4	18.3
Child: 5-14	26.2
Youth: 15-24	18.6
Elderly: 60+	5.1
65+	3.1
Percentage of women aged 15-49	44.9
Median age (years)	17.8
Dependency ratios: total	90.7
(/100) Aged 0-14	84.7
Aged 65+	6.0
Agricultural population density (/hectare of arable land)	5.2
Population density (/sq. km.)	58

Average annual change (000)	
Population increase	118
Births	214
Deaths	96
Net migration	..
Annual population total (% growth)	2.66
Urban	5.01
Rural	1.43
Crude birth rate (/1000)	48.2
Crude death rate (/1000)	21.6
Net migration rate (/1000)	..
Total fertility rate (/woman)	6.50
Contraceptive prevalence rate (% 15-44)	..
Gross reproduction rate (/woman)	3.20
Net reporduction rate (/woman)	2.09
Infant mortality rate (/1000)	143
Maternal mortality rate (/100,000)	450
Life expectancy at birth (years)	
Males	41.4
Females	44.6
Both sexes	43.0
GNP per capita (U.S. dollars, 1990)	240

Sources: Population density on arable land is derived from two publications issued by the Food and Agriculture Organization of the United Nations: FAO Production Yearbook 1985 and World-wide Estimates and Projections of Agricultural and Non-Agricultural Population Segments 1950-2025, ESS/MIS/86/2; gross national product per capita: World Bank, World Development Report 1992. Figures for population, total population by sex, population by age group, age indicators, urban-rural population, and population density (/sq. km.) refer to the year 1990; figures for average annual change, rate of annual change, and fertility and mortality are the five-year averages for 1990-1995. These data are from the Population Division, Department of Economic and Social Development of the United Nations, World Population Prospects: 1992. Figures for maternal mortality are for 1980-1990; figures for contraceptive prevalence rates are for currently married women aged 15-44. Both are from table 5 of World's Women: Trends and Statistics, 1970-1990, New York, United Nations, 1991 (ST/ESA/STAT/SER.K.8). Two dots (..) indicate that data are not available.

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I. SUMMARY

1. The United Nations Population Fund (UNFPA) proposes to support a comprehensive population programme in the amount of $5.2 million, of which $3.5 million would be programmed from UNFPA's regular resources, over a five-year period, starting January 1993, to assist the Government of Sierra Leone in achieving its population and development objectives. UNFPA would seek to provide the balance of $1.7 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available.

2. The proposed programme, UNFPA's second cycle of assistance to Sierra Leone, is based principally on the findings and recommendations of a UNFPA Programme Review and Strategy Development (PRSD) mission that visited the country in September 1990. The PRSD mission had intensive discussions with senior officials of the sectoral ministries, other agencies of the United Nations system, non-governmental organizations (NGOs) and with other multilateral and bilateral donors in the population field. The programme has been designed taking into account the Government's development objectives as expressed in its Socio-Economic Policy Framework Paper (1990-1993), and the country's overall population objectives as stated in the recently adopted National Population Policy for Development, Progress and Welfare.

3. The proposed UNFPA programme would concentrate on three areas: maternal and child health and family planning (MCH/FP); population information, education and communication (IEC); and women, population and development. Its immediate objectives would be: (a) to help reduce maternal and infant morbidity and mortality levels by extending family planning services in nine districts, increasing contraceptive prevalence and promoting responsible parenthood; (b) to support action-oriented programmes in the area of women, population and development aimed at promoting responsible parenthood and creating awareness of other issues concerning health, family planning and development; (c) to strengthen the institutional capacity and develop the human resources needed to implement the country's population programme successfully; and (d) to translate the population policy framework into quantitative terms by setting realistic targets based on appropriate surveys and studies.

4. All projects under the proposed programme, as in all UNFPA-assisted programmes, would be undertaken in accordance with the principles and objectives of the World Population Plan of Action; that is, that population policies should be consistent with internationally and nationally recognized human rights of individual freedom, justice, and the survival of national, regional and minority groups (para. 14(d)); that respect for human life is basic to all human societies (para. 14(e)) and that all couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so (para. 14(f)).

II. BACKGROUND

5. Demographic trends. In 1985 UNFPA assisted Sierra Leone in conducting its third population census. The results of this census showed a total population of 3.5 million, up from 2.7 million in 1974. The annual rate of growth of the population, estimated at 2.7 per cent (1974-1985), will probably increase in the coming years as infant and child mortality decline. (The United Nations projections indicate a population of 5.5 million by the year 2000.) The total fertility rate is estimated at 6.5 children per woman. Life expectancy at birth is estimated at about 42 years, while infant mortality is estimated at about 150 per 1,000 live births. Sierra Leone has an extremely young population with a high dependency ratio of 91 per 100 adults.

6. Sierra Leone's urban population is growing at a rate of over 5 per cent a year. The urban population increased from 26 per cent of the total population in 1974 to 32 per cent in 1985, and it is expected to rise to over 40 per cent by the year 2000. Over 40 per cent of the urban population is in Freetown, the capital city. In recent years, high rural-to-urban migration has intensified.

7. Both knowledge and availability of family planning services are limited in rural areas, and birth spacing in the form of post-partum abstinence is the main contraceptive practice. It is estimated that only 5 per cent of married women use modern contraceptives. Male opposition is regarded as a serious constraint to the expansion of modern family planning methods. Starting in 1992, the Ministry of Health began playing a major role in promoting family planning by including it as a part of MCH services. The prevalence of AIDS is not high compared to other African countries. However, serological surveys among high-risk groups indicate that the disease may be spreading.

8. Social and economic conditions. In recent years, the Government has been constructing health centres and training medical personnel with the aim of making primary health care services accessible to about 70 per cent of the population. Nutritional education and sanitation are also being emphasized. In 1991, the country had 58 hospitals, 129 community health centres, 157 community health posts and 30 mission clinics. There are more than 2,350 trained health care providers, including 320 physicians, 1,477 nurses and midwives, and 312 maternal and child health (MCH) aides.

9. Adult literacy rates are extremely low. According to the United Nations Economic Commission for Africa, in 1990 30.7 per cent of men and 11.3 per cent of women were literate. School enrolment figures are also low -- in 1988 the overall enrolment figure for primary schools was 53 per cent, while only 40 per cent of girls attended primary school. The overall secondary school enrolment rate was 18 per cent. The drop-out rate is very high among both boys and girls. Due to the rising cost of education, access to educational facilities is becoming increasingly difficult.

10. Sierra Leone suffered an acute and deepening economic crisis throughout the 1980s. Based on World Bank figures, the gross national product (GNP) growth rate fell from an average of 2.8 per cent a year from 1965 to 1980 to 0.2 per cent in 1980. Per capita GNP declined from $390 in 1982 to $250 in 1992. Sierra Leone is one of the poorest countries in the world. There are wide disparities in income distribution, and over two-thirds of the population is estimated to be living in absolute poverty.

11. The social, economic and educational status of Sierra Leone women is among the lowest in the world. Due to socio-cultural beliefs, religious practices and the gender-biased interpretation of laws, women have suffered from unequal treatment, unequal rights and unequal opportunity. As a result, Sierra Leone women do not yet participate fully in the development process of their country.

12. The Government is firmly committed to national development, social progress, self-reliance and the improvement of the people's welfare. Several actions have been taken to translate these principles into reality. In 1990, the Government, with the assistance of the World Bank and the International Monetary Fund (IMF), formulated an economic development policy paper with the objective of restoring the macro-economic equilibrium, rehabilitating the infrastructure and strengthening institutional capacity to provide basic services. Recently, an agreement has been reached for an IMF-supported programme to create a favourable investment climate in the country. The Government is also committed to integrating population components into development planning. As a result, the National Population Commission was created in 1982, a national population programme framework (National Population Policy Paper) was formulated in 1989, and in 1992

the Government requested international assistance in developing and implementing action plans for different areas of its population programme.

III. REVIEW OF UNFPA AND OTHER ASSISTANCE TO DATE

13. UNFPA assistance to Sierra Leone dates from 1971, when funding was provided for small-scale activities in family planning, population education, demographic training and research as well as for certain demographic data projects and help with the 1974 population census. By the end of 1984, UNFPA funding has totalled $4 million.

14. The first comprehensive country programme was approved by the Governing Council in 1985 for four years for a total of $2.8 million. The country was not able to utilize that amount effectively during the programme period, and the programme was extended to December 1991. An additional amount of $200,000 was provided to conduct a census of Liberian refugees in Sierra Leone. The major achievements of the programme included raising the awareness of population issues on the part of senior government officials, policy makers and parliamentarians. This helped the Government to formulate the national population policy and to adopt a national family planning programme that included a strategy to improve and expand family planning delivery. A framework for integrating population into development planning was also put into place.

15. Implementation of UNFPA's first country programme was seriously constrained by Sierra Leone's difficult economic situation. As a result, there were delays in meeting counterpart obligations. The non-competitive salary structure of public sector employees led to a high attrition rate for qualified staff at every level. The scarcity of trained and experienced nationals to design and manage population programmes and the poor coordination between the Government and NGOs in the field of family planning services and IEC programmes resulted in a duplication of effort. The lack of appropriate governmental institutions seriously affects such activities as women, population and development and population IEC. The very poor state of the road network and other infrastructure makes supervision and monitoring extremely difficult.

16. Recently, the Government, in collaboration with major donors, has taken the initiative to address these problems with a view towards strengthening its capacity to manage and sustain socio-economic development programmes. Steps taken are designed to increase fiscal discipline, carry out public sector reform and economic restructuring and to improve management. The World Bank is providing significant assistance in this area in order to reduce the size of the civil service and to adjust public sector salaries.

Maternal and child health and family planning

17. UNFPA has been providing assistance to the Government of Sierra Leone in the area of MCH/FP since 1980. UNFPA support began as a pilot activity, and it has since been extended to cover seven district health hospitals and 30 health centres in 11 districts and in the Western area.

18. Although over 130 female health assistants, 82 MCH aides and 430 traditional birth attendants (TBAs) have received training in family planning, follow-up activities have been deficient. In addition, overlapping of geographic areas of intervention with other agencies providing family planning services led to a duplication of efforts and resources. As a result, it was difficult to assess the impact made by each of the various agencies. The mobile team strategy that was adopted for service delivery did not prove to be cost effective either in terms of resources expended or in the number of acceptors gained. Other factors that affected project implementation were the weak institutional capacity, the lack of a coherent policy or programme, weak

management information systems (MIS) and logistics, including monitoring and supervision, and lack of precise service delivery targets.

Information, education and communication

19. The major objective of UNFPA efforts in the field of population IEC was to change behavioural attitudes in a positive manner through the promotion of greater awareness at all levels of society of population issues, problems and solutions. UNFPA assistance for population education in the formal sector was targeted at youth in secondary schools, pre-service teacher training and adult education training programmes. The major activities included the preparation of teacher's guides and resource books in certain core subjects and the training of teachers in writing skills and in the use of these materials.

20. Intervention in the non-formal education was largely targeted at organized cooperative and women's groups. The strategy was to use income-generating activities as the entry point for supplying family planning information. However, the desired linkage did not materialize because of lack of expertise on the part of national NGOs in carrying out these integrated programmes.

Data collection and analysis

21. One of the main objectives of the first UNFPA programme of assistance was to help provide reliable data for national development planning. UNFPA assisted with the 1985 population census, which was conducted in collaboration with UNDP's assistance for household surveys. The successful completion of the 1985 national census provided the necessary database for socio-economic planning. UNFPA assistance strengthened national capacity through overseas and local training and technical backstopping.

22. The successful completion of the household survey helped the Central Statistical Office (CSO) strengthen its capacity to collect and analyse basic socio-economic data required for planning. The CSO has now analysed the population census data and has held a seminar to disseminate the findings. However, the timely completion of project activities was hindered by high staff turnover. The unreliable supply of electricity delayed publication of the census reports and was also a cause of the relatively high cost of maintaining equipment. On a positive note, however, the experience gained by national experts in all phases of the census has inspired confidence in their ability to carry out planned activities during the second country programme.

23. UNFPA assistance in developing a unified system of vital registration began in 1980. The objectives included promulgating the enabling law and establishing operating rules for the registration of vital statistics in Sierra Leone as well as helping to set up the structure and train the staff necessary to carry out a model registration programme in selected areas of Freetown. Although many of the objectives were achieved, there is a need to consolidate activities. Weak infrastructure and financial constraints may make it difficult to sustain and expand the civil registration programme.

Population policy formulation

24. UNFPA assistance helped to create the Population and Human Resources Section (PHRS) in the Department of Finance, National Development and Economic Planning and the National Population Commission (NPC). It also assisted in developing a national population programme framework, which was

announced in 1989, and in formulating sector action plans and in filling in some critical gaps in the demographic database.

25. The present low profile and inadequate staffing of the PHRS have created a weak institutional base that needs strengthening. A strengthened PHRS would be able to help the National Population Commission play a more dynamic role in coordinating, monitoring and evaluating population programmes. The PHRS has made considerable progress in disseminating information on population activities to institutional and other target groups. Other national institutions, such as the University of Sierra Leone, continue to play a significant role in the area of population and development research.

Women, population, and development

26. Efforts to improve the condition of women were implicitly integrated into projects in other sectors, most notably in MCH/FP and IEC. Such efforts had varying levels of success. Many of the IEC materials used to support family planning activities were often not adequate or pertinent to either gender issues or the socio-cultural context. One of the very few quantitative studies of the impact of women in development activities showed that in one family welfare education project 148 women were trained in income-generating activities. There are no data or follow-up actions to assess the impact or sustainability of the activity.

Other external assistance

27. Other donors active in health and related activities in Sierra Leone are UNICEF, the World Bank and, to a smaller extent, the United States Agency for International Development (USAID), the German Agency for Technical Cooperation (GTZ), the French Government and selected international NGOs. UNICEF is by far the major donor, earmarking $16 million from various funding sources for activities over a five-year period, 1991-1995. The UNICEF programme focuses primarily on the expanded programme of immunization (EPI), social and community mobilization and related activities. The World Bank is focusing its assistance on the essential drugs programme, renovating and re-equipping health facilities and strengthening institutional capacity.

28. USAID, until it phased out locally-funded activities in 1989, supported family planning activities through its Family Health Initiatives in the Bo, Moyamba and Bombali districts by providing training, fellowships and contraceptive supplies. The GTZ, as part of a multisectoral rural development project in two districts in Southern province, supported the Ministry of Health in implementing a nutrition programme and a primary health care programme (PHC), including family planning information and services.

29. The International Planned Parenthood Federation (IPPF) through its local affiliate, the Planned Parenthood Association of Sierra Leone (PPASL), supported family planning activities that included the provision of contraceptives, equipment, laboratory facilities and outreach efforts in the Western area and in many provincial areas. The Pathfinder Fund provided support for the PPASL's community-based distribution project and also to the NPC in the preparation of population policy position papers, study tours and conferences. Population Services (a European NGO), the European Community and Marie Stopes International provided funds in support of family planning activities of the Marie Stopes Society, including the provision of contraceptives, equipment and other supplies. The result of all these activities could be said to be rather modest.

IV. PROPOSED PROGRAMME 1993-1997

30. The overall needs of Sierra Leone for assistance in the population sector are enormous, wide-ranging and beyond the resources that UNFPA can provide to the country. The UNFPA programme, therefore, has been designed to concentrate on three areas, namely, MCH/FP, IEC, and women, population and development. In addition, limited assistance would be given to other areas of UNFPA's mandate. Its immediate objectives are detailed in paragraph 3. The programme strategies devised to achieve these objectives are as follows: family planning activities would be integrated into MCH services within the context of the primary health care using the UNICEF expanded programme of immunization (EPI) service delivery network. UNICEF would continue to implement the UNFPA activities, which would include training in family planning counselling and referrals, delivery of services, and development of culturally sensitive IEC messages. UNFPA would also assist the Government in collecting population data through baseline studies and in using this information in setting realistic targets and evaluating the results of various activities. The Fund would also provide assistance for staff training at the MCH/FP Division in the Ministry of Health, the Central Planning Unit of the National Population Commission, and the Central Statistical Office.

31. Other programme strategies would include: (a) strengthening the role of NGOs by promoting greater collaboration between the Government and NGOs through joint activities and by involving NGOs in the work of population advisory committees; (b) enhancing collaboration and coordination among international donors; and (c) promoting national execution of programme activities through greater use of national expertise, complemented by the technical backstopping provided by the UNFPA Country Support Team based in Dakar, Senegal. The proposed programme would also continue efforts to implement the population policy, increase the contraceptive prevalence rate, and develop and implement comprehensive and coordinated IEC and women, population and development programmes.

Maternal and child health and family planning

32. In the MCH/FP sector, UNFPA would employ the following four-pronged approach to help reduce the country's high levels of infant, child and maternal morbidity and mortality: (a) integrate family planning services into MCH services, using the EPI network developed by UNICEF; (b) extend the coverage of integrated MCH/FP services in 9 of the country's 13 districts, making use of the primary health care service-delivery network and staff and community-based distribution activities; (c) increase the supply of contraceptives in order to increase the contraceptive prevalence rate from 5 per cent to 12 per cent; and (d) make use of the IEC component of the primary health care network to promote family planning and responsible parenthood. The Fund would seek, through training and technical support, to strengthen the institutional capacity of the MCH/FP Division, at both the central and district levels, so that it can progressively improve the quality of reproductive health and family planning services provided in the 9 districts.

33. The EPI network is not at present equipped to provide contraceptive information and services. UNFPA assistance would therefore be used to train EPI staff in key aspects of family planning service delivery as well as provide contraceptives and related medical equipment and supplies. The extension of integrated MCH/FP services throughout the primary health care network would be accomplished in stages, starting with the Western area and Port Loko districts, in an effort to reduce any unnecessary duplication of services with other donor agencies. The activities of the first stage would be evaluated so that the experience gained could be used to improve activities in subsequent stages. UNFPA would also provide support to help set up a mechanism to coordinate the MCH/FP and related IEC activities of the leading NGOs active in the country.

34. UNFPA proposes to provide $2.8 million for the MCH/FP sector, of which $600,000 would be sought from other sources, including multi-bilateral sources. Approximately $1.2 million of that amount would be earmarked for contraceptive supplies.

35. As the project activities expand beyond the envisaged target areas, and in order to meet the demands for family planning services, additional assistance would be required. It will be necessary to seek other sources of financial support or of contraceptive supplies. The contraceptives that have been made available through UNFPA assistance, and which would continue to be provided, include oral contraceptive pills, the most widely used, followed by injectables, IUDs and lastly, condoms. If a decision is made to introduce other methods into the contraceptive mix, special efforts would be required to ensure adequate management through the training of staff.

Information, education and communication

36. UNFPA assistance to the IEC sector would be aimed at promoting awareness among policy makers, community, religious and traditional leaders and the public at large on population and development issues in general as well as on the objectives of the government population policy. It would seek to provide both men and women with information and education on the value of small family size and child-spacing through culturally sensitive and targeted messages.

37. The proposed strategy would be carried out in both the formal and the non-formal sectors. In the non-formal IEC sector, UNFPA would provide support to setting up an inter-ministerial/NGO advisory body to guide and direct the National Population Commission secretariat in its efforts to formulate, implement and coordinate a national population IEC programme. Assistance would be given to training in IEC skills with the ultimate aim of creating a national consensus that would provide the right climate for population activities.

38. The main consideration would be the need to reach adolescents and men with the message of promoting responsible sexual behaviour. In order to do so, support would be given to conduct the relevant sociocultural research that would enable the IEC programme to utilize both modern and traditional communication media. These efforts would be coordinated with the work of such national NGOs as the National AIDS Committee, the Planned Parenthood Association of Sierra Leone and the Sierra Leone Home Economics Association (SLHEA) and with such international organizations as UNICEF.

39. In the formal sector, UNFPA would build upon its existing assistance to integrate population education into the social studies curriculum. So far, population education is part of the curriculum in 140 secondary schools. A goal of the proposed programme would be to expand these activities to the remaining 80 secondary schools in the country. For this purpose, it is estimated that it will be necessary to train 300 teachers. (It is also necessary to provide refresher training to approximately 120 who have already been trained as well as to the population education programme staff in the teachers training institutions.) UNFPA would continue to provide assistance for the production of population education teaching and learning materials. The National Curriculum Centre, which is the national counterpart for these activities, has the experience and training to monitor and evaluate programme activities.

40. UNFPA proposes to provide a total amount of $1 million for activities in the IEC sector, of which $400,00 would be sought from other sources, including multi-bilateral sources.

Women, population and development

41. The objectives of UNFPA assistance in the field of women, population and development would be: (a) to assist the Government in integrating population elements into a national policy for the advancement of women; and (b) to help make the population aware of the importance of women's reproductive health to family welfare and their important role in national development.

42. The programme strategy would be to strengthen, in collaboration with UNDP and UNICEF, the capacity of the Women's Bureau within the Department of Health and Social Services to plan, implement, coordinate, monitor and evaluate activities that are geared towards enhancing the status of women. In this regard, support would be provided for improving women's health, increasing the literacy rate of women as well as in setting up income generation activities. This would be achieved by providing support for training activities for production and testing of IEC materials for the organization of workshops and seminars, and for the collection and dissemination of gender-specific data. In addition, a knowledge, attitude and practice (KAP) study of family planning would be carried out as well as other studies on the effects of such traditional practices as female circumcision.

43. UNFPA proposes to provide a total of $300,000 to support activities in the area of women, population and development, of which $100,000 would be sought from other sources, including multi-bilateral sources.

Assistance to other population sectors

44. Financial constraints would not permit an expanded programme of assistance to other population sectors. However, in recognition of the importance of data collection and analysis, population policy formulation and demographic research and training, UNFPA would provide limited assistance to these sectors to the extent that activities are either generated by or are deemed to be of direct benefit to the principal sectors of the UNFPA country programme outlined above.

45. UNFPA would provide assistance for limited, closely-defined training activities in the area of data collection. Support would be given to in-country specialized training on the interrelationship between population, development and the environment for middle level and senior government staff from various ministries. They would make use of data obtained from the ongoing socio-demographic survey and the planned baseline surveys for training purposes and in setting targets for the population policy and other population projects. UNFPA would consider providing support for the NPC secretariat to enable it to conduct awareness creation workshops and seminars for national population professionals as well as for national leaders. These activities would be a collaborative effort among University-based research centres, the NPC secretariat and the Central Statistical Office.

46. UNFPA proposes to allocate $400,000 from its own resources for activities in this area and would seek an amount of $600,000 from other sources, including multi-bilateral sources, to be earmarked for the 1995 national population census.

Programme reserve

47. An amount of $100,000 would be held in reserve for any unforeseen proposals that may be developed within the framework of the proposed programme.

Programme coordination

48. The Department of Finance, National Development and Economic Planning is responsible for mobilizing, monitoring and coordinating all external assistance to the country. A combined government and United Nations task force has been set up to ensure the effective and efficient use of external aid. In the field of population, the Department of Finance, National Development and Economic Planning and the Department of Health are currently the two major focal points, and the UNFPA programme has been designed to strengthen their coordination capacity. The Joint Consultative Group on Policy (JCGP) would provide a forum for coordinating and harmonizing sectoral approaches and the activities of the member agencies of the United Nations system. UNFPA participates actively in the JCGP forum.

Programme monitoring, evaluation and management

49. Programme implementation would be monitored through the preparation of programme management plans, collection of pre-project baseline data and the incorporation of built-in evaluation mechanisms into project activities. The programme and its constituent parts would make full use of available and appropriate national and regional technical backstopping capacities, complemented by advisory services from the UNFPA Country Support Team based in Dakar. There would be a mid-term review in 1995 and a final review in 1997.

Financial summary

50. As indicated in paragraph 1, UNFPA would provide assistance in the amount of $5.2 million over the five-year period 1993-1997, of which $3.5 million would be programmed from UNFPA's regular resources. UNFPA would seek to provide the balance of $1.7 million from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources become available. The breakdown by programme area is as follows:

	UNFPA regular resources $	Other resources $	Total $
Maternal and child health and family planning	2,200,000	600,000	2,800,000
Information, education and communication	600,000	400,000	1,000,000
Other population sectors (population policy, data and research)	400,000	600,000	1,000,000
Women, population and development	200,000	100,000	300,000
Programme reserve	100,000	-	100,000
TOTAL	3,500,000	1,700,000	5,200,000

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V. RECOMMENDATION

51. The Executive Director recommends that the Governing Council:

(a) Approve the programme for Sierra Leone in the amount of $5.2 million for the five-year period 1993-1997;

(b) Authorize the Executive Director to programme, subject to the availability of funds, an amount of $3.5 million from UNFPA's regular resources;

(c) Further authorize the Executive Director to provide the balance of $1.7 million of the approved programme from a combination of UNFPA regular resources and other resources, including multi-bilateral resources, when and to the extent such additional resources from any of the above sources become available;

(d) Authorize the Executive Director to allocate the funds and make appropriate arrangements with the Government of Sierra Leone and with the executing agencies.